A 30-year-old woman with antiphospholipid syndrome (APS) was admitted for arthralgia, skin ulceration (Figure 1) and auricular chondritis, 1 week after an intrauterine fetal death at 25th week of gestation. Physical examination showed a limited cutaneous necrosis of the neck as well as livedo, bilateral mild auricular chondritis and polyarthralgia. Lab tests showed anti-DNA antibodies, and proteinuria 1 g/day. Kidney biopsy showed a non-proliferative lupus nephropathy. Skin biopsy of the neck lesion was consistent with thrombotic vasculopathy with predominantly fibrin-rich micro thrombi in multiple small dermal vessels. No picture suggestive of vasculitis was observed. This skin lesion was then related to APS. Common skin manifestations of APS are livedo reticularis, necrotizing vasculitis, thrombophlebitis, splinter haemorrhages, leg ulcers, distal cutaneous ischaemia, skin infarcts and acrocyanosis. The skin lesion reported here is therefore atypical although micro-thrombi of small dermal vessels are likely to be due to APS, and not to lupus.

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Reference